

FINANCIAL AFFIDAVIT

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE

IN THE CASE OF
IN UNITED STATES☒ MAGISTRATE☐ DISTRICT☐ APPEALS COURT or☐ OTHER PANEL (Specify below)

US v. WARE

FOR

AT

ND IL
Chicago

LOCATION NUMBER

PERSON REPRESENTED (Show your full name)

KEVIN WADDELL

CHARGE/OFFENSE (describe if applicable & check box →)

21 USC 846

☒ Felony☐ Misdemeanor

- 1 ☒ Defendant—Adult
 2 ☐ Defendant - Juvenile
 3 ☐ Appellant
 4 ☐ Probation Violator
 5 ☐ Parole Violator
 6 ☐ Habeas Petitioner
 7 ☐ 2255 Petitioner
 8 ☐ Material Witness
 9 ☐ Other

DOCKET NUMBERS

Magistrate

08 CR 0122-6

District Court

ND IL

Court of Appeals

08 CR 122-6

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

ASSETS	EMPLOYMENT	Are you now employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self-Employed
		Name and address of employer: _____
	OTHER INCOME	IF YES, how much do you earn per month? \$ _____
		IF NO, give month and year of last employment _____ How much did you earn per month? \$ _____
CASH	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES RECEIVED \$ _____ SOURCES _____	
PROPERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	IF YES, GIVE THE VALUE AND \$ DESCRIBE IT VALUE _____ DESCRIPTION _____	
OBLIGATIONS & DEBTS	DEPENDENTS	MARITAL STATUS <input checked="" type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED Total No. of Dependents _____ List persons you actually support and your relationship to them 5 children - pays occasional support as available
	DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)	APARTMENT OR HOME: DNA Creditors _____ Total Debt \$ _____ Monthly Payment \$ _____ _____ \$ _____ _____ \$ _____ _____ \$ _____

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

2-13-08

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)

X Kevin Waddell